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APPLICANTS

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** CONTINUING DATA *****

This application is a 371 of PCT/GB00/00003 01/06/2000

** FOREIGN APPLICATIONS *****

UNITED KINGDOM 9900167.9 01/06/1999

** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 14	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 6
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

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TITLE

Wound healing and orofacial clefting

FILING FEE

FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT
No. _____ for following:

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees (Filing)
<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)

RECEIVED
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☐ 1.18 Fees (Issue)

☐ Other

☐ Credit